Approved for use through 10/31/2002. OMB 0651-0032

Type a plus sign (+) inside this box

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

UTILITY								
PATENT APPLICATION								
TRANSMITTAL								

(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))

	-			
Attorney Docket No.			H 5138 PCT/US	
	First I	nventor	Burg, Birgit	TC 9
	Title	DETERGENT VISCOELAST	SHAPED BODIES WITH TC PHASE	J.S. F 454
	Evore	ss Mail I ahel No	EV 274369819 US	တ္

(6.1.) 16. 116.11		Exp	ress Ma	ail Label No. EV 2/4	369819 05			
APPLICATION ELEMENTS			ASSISTANT Commissioner for Patents ADDRESS TO: Assistant Commissioner for Patents Box Patent Application					
See MPEP chap	pter 600 concerning utility patent application contents	<u> </u>	Washin	gton, DC 20231				
	ee Transmittal Form (e.g., PTO/SB/17) bmit an original and a duplicate for fee processing)		7.	CD-ROM or CD-R in d Computer Program (A		ble or		
<u> </u>	plicant claims small entity status. 37 CFR 1.27.		Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)					
	ecification [Total Pages 70] ferred arrangement set forth below)		a.	Computer Readal	ole Form (CRF)		
	escriptive title of the Invention		b.	Specification Sequ	ence Listing o	n:		
- C	ross References to Related Applications			i. 🗆 CD-ROM	or CD-R (2 cop	pies); or		
- Si	tatement Regarding Fed sponsored R&D			ii. 🗆 paper				
	eference to sequence listing, a table, r a computer program listing appendix		C.	Statements verifying	ng identity of a	bove copies		
- B	ackground of the Invention			ACCOMPANYING	G APPLICATION	ON PARTS		
- Bi	rief Summary of the Invention		9.	Assignment Papers	(cover sheet 8	document(s))		
	rief Description of the Drawings (if filed) etailed Description	0	10.	37 C.F.R.§3.73(b) S (when there is an assig		Power of Attorney		
· - C	laim(s)		11.	English Translation	Document <i>(if a</i>	pplicable)		
- A	bstract of the Disclosure		12.	x Information Disclosure Statement (IDS)/PTO-3	449 X	Copies of IDS Citations		
4. Dra	awing(s) (35 U.S.C. 113) [Total Sheets]]	13.	Preliminary Amenda				
5. Oath or De	claration [Total Pages 3]	14. x Return Receipt Postcard (MPEP 503)					
а. 🗶	Unexecuted (original or copy)	J	15.	(Should be specifically item Certified Copy of Priori	ty Document(s)			
b. Copy from a prior application (37 C.F.R. § 1.63(d)) (for continuation/divisional with Box 18 completed)				(If foreign priority is claimed) Request and Certification under 35 U.S.C. 122 (b)(2)(B)(I).				
DELETION OF INVENTORIS			Applicant must attach form P10/SB/35 or its equivalent					
Signed statement attached deleting			'" [.] L	X Other: Internation	iai Seaicii Re	port		
inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).								
6. App	plication Data Sheet. See 37 CFR 1.76							
	TINUING APPLICATION, check appropriate box,	and supp	ly the red	quisite information below an	d in a preliminary	amendment, or in an		
	a Sheet under 37 CFR 1.76: Itinuation Divisional Continuation-in-part (CIP)		of prior application No: PC	T/ED02/04170 6	lod April 16, 2002		
	plication information: Examiner	•		Group / Art Unit:	1/2702/041/01	<u>led April 10, 2002</u>		
For CONTINUA	TION or DIVISIONAL APPS only: The entire disc	losure of	the prio	application, from which a	n oath or decla	ration is supplied under		
Box 5b, is cons	sidered a part of the disclosure of the accompany tion can only be relied upon when a portion has b	ing conti	nuation	or divisional application a	nd is hereby inc	corporated by reference.		
me meorporat				ADDRESS	за аррисалон р	urto.		
E Gastonio Manibor of Bar Godo Labor			0423		Corresponde	nce address below		
(Insert Customer No. or Attach bar code label here)								
Name Henkel Corporation								
A ddra = =	Law Department							
Address	2500 Renaissance Blvd., Suite 200							
City	Gulph Mills	State PA Zip Code 19406						
Country	US	Telepho	ne	610-278-4926	Fax	610-278-6548		

Name (Print/Type)	Murphy .لر. Glenn	Registration No. (Attorney/Agent)	33,539	
Signature	She Ef my	Date	10/27/03	

Burden Hour Statement: This form is estimated to take 0.2 hours to complete Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

102703

Signature

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANS	MITTAI	Complete if Known					
		Application Number	To be assigned				
for FY 2003		Filing Date	To be assigned				
Effective 01/01/2003. Patent fees are s	ubject to annual revision.	First Named Inventor	Burg, et al.				
☐ Applicant claims small entity status. See 37 CFR 1.27		Examiner Name					
I TOTAL AMOUNT OF LATMENT	(\$)	Art Unit					
	860.00	Attorney Docket No.	H 5138 PCT/US				

METHOD OF DAVMENT (check all that apply)	EEE CALCIII ATION (continued)							
METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)							
☐ Check ☐ Credit Card ☐ Money ☐ Other ☐ None 3. ADDITIONAL FEES								
Deposit Account:	Large	Entity.	Small	Entity				
Deposit Account 01-1250 Order No. 03-0497	Fee Code	Fee (\$)	Fee Code	Fee (\$)	-	Fee De	scription	Fee Paid
Number	1051	130	2051	65	Surcharge - I	late filing fee o	or oath	
Deposit Account Henkel Corporation	1052	50	2052	25	Surcharge - I	late provisiona	al filing fee or cover sheet.	
Name	1053	130	1053	130	Non-English			
The Commissioner is authorized to: (check all that apply) ☑ Charge fee(s) indicated below ☐ Credit any overpayments	1812	2,520	1812	2,520	For filing a re	quest for ex p	arte reexamination	
☑ Charge any additional fee(s) during the pendency of this application	1804	920*	1804	920*	Requesting p	ublication of S	SIR prior to Examiner action	
☐ Charge fee(s) indicated below, except for the filing fee	1805	1,840*	1805	1,840*	Requesting p	ublication of S	SIR after Examiner action	
to the above-identified deposit account. FEE CALCULATION	1251	110	2251	55	·Extension for	reply within fi	rst month	<u> </u>
1. BASIC FILING FEE	1252	420	2252	210		reply within s		
Large Entity Small Entity	1253	950	2253	475	Extension for	reply within the	nird month	
Fee Fee Fee Fee Fee Description Fee Paid Code (\$) Code (\$)	1254	4 400	2254	740	Eviension for	reply within fo	with month	
Code (\$) Code (\$) 1001 770 2001 385 Utility filing fee	1254 1255	1,480 2,010	2254 2255	740 1,005		reply within fi		
1002 340 2002 170 Design filing fee	1401	330	2401	165	Notice of App	eal		
1003 530 2003 265 Plant filing fee	1402	330	2402	165	Filing a brief i	n support of a	ın appeal	
1004 770 2004 385 Reissue filing fee	1403	290	2403	145	Request for o	rat hearing		
1005 160 2005 80 Provisional filing fee	1451	1,510	1451	1,510	Petition to ins	titute a public	use proceeding	
	1452	110	2452	55	Petition to rev	/ive – unavoid	able	
SUBTOTAL (1) (\$) 770.00	1453	1,330	2453	655	Petition to rev	vive - unintent	ional	
	1501	1,330	2501	655		e (or reissue)	•	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE Fee from	1502 1503	480 640	2502 2503	240 320	Design issue Plant issue fe			
Extra Claims below Fee Paid								
Total Claims 25 -20**= 5 X \$18.00 = 90	1460	130	1460	130		e Commissio		
Independent 1 - 3**= 0 X \$86.00 = 0	1807	50	1807	50	_	e under 37 C		
Multiple Dependent \$290.00 = 0	1806	180	1806	180			Disclosure Stmt	
	8021	40	8021	40	Recording ea		ignment per property (times	
Large Entity Small Entity	1809	770	2809	385		ission after fir	al rejection	
Fee Fee Fee Fee Description	1810	770	2810	385	For each add		on to be examined (37 CFR	
Code (\$) Code (\$) 1202 18 2202 9 Claims in excess of 20	1801	770	2801	385	§ 1.129(b)) Request for C	Continued Exa	mination (RCE)	
1201 86 2201 43 Independent claims in excess of 3	1802	900	1802	900			nination of a design	
					application		•	
1203 290 2203 145 Multiple dependent claim, if not paid 1204 86 2204 43 ** Reissue independent claims over	Other	fee (spe	ecify)					
original patent						<u> </u>		
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent								
SUBTOTAL (2) (\$) 90	* Redu	ced by	Basic F	iling Fee	e Paid	SUB	TOTAL (3) (\$) 0	
** or number previously paid, if greater, For Reissues, see above								
SUBMITTED BY						Comp	lete (if applicable)	
Name (Print/Type) Glenn E. Murphy	-	tration I	ĮOO,	539			(610) 278-4926	
	(Attorr	ney/Age	nt)					

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.

Date

03